50325-0081



213/1/2

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

	Applicat 1 JIAO	ion of:	)	Confirmation No. 4659					
Serial	No.:	09/435,015	)	Examiner: Ahmedur R. ALI					
Filing	Date:	November 5, 1999	)	Group Art Unit: 2131					
For:	RECEIVED								
Mail Stop FEE Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450				OCT 2 0 2003 Technology Center 2100					
Dear S	Sir:								
Transr	nitted h	erewith is a Reply to Office Action in the	ab	ove-identified application.					
$\boxtimes$	Additi	onal fee is required.							
	Also a	ttached: Figures							
$\boxtimes$	Postca	rd.							

The fee has been calculated as shown below:

	NO. OF CLAIMS	HIGHEST PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	FEE
Total Claims	26	20	6	\$18.00 =	\$108.00
Independent Claims	9	5	4	\$86.00 =	\$344.00
		Multiple claims	\$ 0.00		
		Fee for extension	\$ 0.00		
		TOT	\$452.00		

Enclosed is a check in the amount of \$452.00. Please charge any deficiency of fee to Deposit Account No. <u>50-1302</u>. An additional copy of this transmittal sheet is submitted herewith.

## Application of JIAO, Ser. No. 09/435,015 filed November 5, 1999 GAU 2131—Ahmedur R. ALI

The Commissioner is hereby authorized to charge payment of any fees associated with this communication or credit any overpayment, to Deposit Account No. <u>50-1302</u>, including any filing fees under 37 CFR 1.16 for presentation of extra claims and any patent application processing fees under 37 CFR 1.17.

Respectfully submitted,
HICKMAN PALERMO TRUONG & BECKER LLP

Dated: October 9, 2003

By: David Lewis

Patent Agent, Registration No. 33,101

1600 Willow Street San Jose, CA 95125 (408) 414-1080 ext. 213 DL/ta

**Date: October 9, 2003** Facsimile: (408) 414-1076

## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Mail Stop Fee Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

on October 9, 2003